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CITY AND COUNTY OF LICHFIELD

ANNUAL REPORTS

of the

MEDICAL OFFICER OF HEALTH

and of the

PUBLIC HEALTH INSPECTOR

1963

CITY AND COUNTY OF LICHFIELD

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Medical Officer of Health

C. E. Jamison, B.A., M.B., D.P.H.

Public Health Inspector

J. Fineron, D.P.A., F.A.P.H.I., F.R.S.H.

CITY AND COUNTY OF LICHFIELD.

ANNUAL REPORT

of the

Medical Officer of Health

1963

To the Mayor, Aldermen and Councillors,
City and County of Lichfield.

I have pleasure in presenting my report on the health of the community, or at least certain aspects of it, and on the work of the Health Department during 1963.

As in earlier years, I am indebted to Members and other Officers of the Council for their continued co-operation during the year, and especially to the Surveyor, Housing Manager and Public Health Inspector for their contributions, in various ways, to this report.

C. E. JAMISON.

Medical Officer of Health

Guildhall,

20th July, 1964.

GENERAL STATISTICS

Particulars of the area, population, number of inhabited houses, total rateable value of all property subject to rates and the product of a penny rate are set out below in the same form as in earlier years:-

Area (in acres)	3,597
Population	16,490
Number of Inhabited Houses	5,072
Total Rateable Value of Property.. .. .	£570,404
Product of a Penny Rate	£2,300

It will be seen, by comparison with previous years, that while the area remained as before all other figures show marked increases. The increases in population and in the number of occupied houses reflect the way in which the City is now growing. As regards the large increases in the rateable value of property and in the product of a penny rate, the amount of the increase is mainly due to the effects of revaluation, though the increase in the number of houses, factories and shops, has, of course, played its part in producing the present figures.

VITAL STATISTICS

<u>Live Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	201	188	389
Illegitimate	6	7	13
Totals	207	195	402


Live Birth Rate per 1,000 Population - 24.4

<u>Still Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	1	6	7
Illegitimate	--	--	--
Totals	1	6	7

Still Birth Rate per 1,000 Live and Still Births - 17.1

<u>Deaths of Infants Under One Week of Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	3	1	4
Illegitimate	--	--	--
Totals	3	1	4

Early Neonatal Death Rate per 1,000 Live Births - 10.0



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After adjusting the local figures, where this adjustment is appropriate, in accordance with the comparability factors provided by the Registrar General, to allow for local variations in age and sex of inhabitants, as compared with those in the country as a whole, the following table shows how the local figures compare with the national ones:-

Area	Live Birth Rate	Still Birth Rate	Neonatal Death Rate	Infant Death Rate	Death Rate (All Ages)
Lichfield	22.2	17.1	10.0	12.4	9.6
England and Wales	18.2	17.3	14.1	20.9	12.2

While, for the reason stated above, not attaching too much significance to the local figures, it is pleasant to be able to record that, in each case, they compare favourably with the national figures.

The following table shows the causes of death of persons ordinarily resident in the City who died during the year, regardless of where the death actually occurred:-

Disease	Total 1958	Total 1959	Total 1960	Total 1961	Total 1962	1963		
						M	F	Total
Pulmonary Tuberculosis	--	1	2	1	1	--	1	1
Other Tuberculosis	--	--	--	--	--	--	--	--
Syphilitic Disease	1	--	--	--	--	--	--	--
Diphtheria	--	--	--	--	--	--	--	--
Whooping Cough	--	--	--	--	--	--	--	--
Meningococcal Infections	--	--	--	--	--	--	--	--
Acute Poliomyelitis	--	--	--	--	--	--	--	--
Measles	--	--	--	--	--	--	--	--
Other Infective and Parasitic Disease	--	--	--	--	--	--	--	--
Malignant Neoplasm of Stomach	1	--	3	2	4	1	1	2
Malignant Neoplasm of Lung and Bronchus	1	2	5	8	2	7	--	7
Malignant Neoplasm of Breast	2	3	2	--	2	--	1	1
Malignant Neoplasm of Uterus	1	--	--	1	1	--	--	--
Other Malignant & Lymphatic Neoplasms	11	20	13	19	12	6	4	10
Leukaemia and Aleukaemia	--	--	2	1	--	2	--	2
Diabetes	2	2	2	--	--	1	1	2
Vascular Lesions of Nervous System	20	24	29	29	24	6	16	22
Coronary Disease and Angina	8	10	23	27	24	19	9	28
Hypertension with Heart Disease	2	2	2	1	3	3	1	4
Other Heart Diseases	20	29	22	20	18	7	10	17
Other Circulatory Diseases	6	13	6	16	15	6	9	15
Influenza	--	8	--	4	6	--	--	--
Pneumonia	4	4	6	7	9	2	2	4
Bronchitis	12	7	6	0	10	11	6	17
Other Diseases of Respiratory System	3	6	4	3	5	1	3	4
Ulcer of Stomach and Duodenum	2	--	--	5	1	--	--	--
Gastritis, Enteritis and Diarrhoea	2	2	2	1	--	--	--	--
Nephritis and Nephrosis	--	--	--	2	1	--	--	--
Hyperplasia of Prostrate	3	2	2	--	1	1	--	1
Pregnancy, Childbirth and Abortion	--	--	--	--	--	--	--	--
Congenital Malformations	2	1	5	3	3	2	--	2
Other Defined and Ill-Defined Diseases	33	23	42	19	16	11	15	26
Motor Vehicle Accidents	2	2	3	1	2	3	1	4
All Other Accidents	3	3	--	2	3	2	--	2
Suicide	2	1	2	--	1	--	1	--
Homicide and Operations of War	--	--	--	--	--	--	--	--
All Diseases	130	143	155	183	166	91	81	172

<u>Deaths of Infants Under Four Weeks of Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	3	1	4
Illegitimate	--	--	--
Totals	3	1	4

Neonatal Death Rate per 1,000 Live Births - 10.0

<u>Deaths of Infants Under One Year of Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	4	1	5
Illegitimate	--	--	--
Totals	4	1	5

Infant Death Rate per 1,000 Live Births - 12.4

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths (All Ages)	91	81	172

Death Rate (All Ages) per 1,000 Population - 10.4

It will be seen, from the above figures, that one birth, live and still, in every 31 was illegitimate. This figure compares very favourably with those of previous years, one in 22 in 1962, one in 18 in 1961, one in 28 in 1960, one in 24 in 1959, one in 15 in 1958 and one in 22 in 1957.

It will also be seen that, as neither stillbirths nor infant deaths occurred in illegitimate infants, the question of comparison with the figures in respect of legitimate infants does not arise.

The following table shows how the figures for 1963 compare with those for preceding years:-

Year	Estimated Population	Live Birth Rate	Still Birth Rate	Neonatal Death Rate	Infant Death Rate	Death Rate (All Ages)
1957	11,190	20.1	26.0	26.7	26.7	11.6
1958	11,510	21.4	39.0	12.2	24.4	12.4
1959	12,180	17.6	13.7	9.3	18.6	12.7
1960	12,840	22.0	20.8	10.6	24.8	14.2
1961	14,240	21.8	40.2	12.9	12.9	12.6
1962	15,350	20.0	19.2	12.0	19.5	9.5
1963	16,490	24.4	17.1	10.0	12.4	10.4

While too much significance should not be attached to the various rates quoted, in view of the very small population on which the figures are based, which leads to considerable fluctuations from year to year, it can reasonably be observed that, with the exception of the total death rate, irrespective of age, all the figures compare favourably with other recent years, while the death rate only compares unfavourably with that for 1962, when the rate was quite unusually low.

Of these deaths, five, as already recorded, took place in infants under one year of age, while two further deaths occurred in older pre-school children. There were no deaths in children of school age. Only 32 of the deaths occurred at ages between 15 years and 65 years. Coming to deaths in older persons, 26 men and 20 women died at ages between 65 years and 75 years, and 37 men and 50 women at ages over 75 years. The latter figures show the greater longevity of women, as compared with men.

As indicated in the statistical tables, four of the five infant deaths actually occurred before the end of the first week of life, two being due to prematurity, one to congenital abnormality and one to pneumonia. The later infant death was attributed to a congenital abnormality. The figures again demonstrate the enormous improvement, as compared with earlier years, in the chances of the child who survives to the end of the first week of life, and also how difficult it is to further reduce the mortality of infants during the first week of life.

The seven deaths resulting from cancer of the lung and bronchus can be compared with the two deaths in the previous year, eight in 1961, five in 1960, two in 1959 and one in 1958. It will be noted that all occurred in men. Fortunately, six of the seven deaths occurred at ages over 65 years, and the remaining death in a man only slightly younger. As there have been no major developments in the national campaign against cigarette smoking, the factor mainly responsible for the disease, one must anticipate that the number of deaths resulting from this cause will continue to rise year by year and, in another generation or so, due to changed smoking habits, is likely to involve women in a much greater degree than is now the case.

It is very encouraging to note that both of the deaths attributed to diabetes occurred in persons over 75 years, showing the successful results of treatment in the numerous, younger people subject to the disease.

It is noteworthy that no fewer than 96 of the total of 172 deaths resulted from diseases of the heart and cardiovascular system. Naturally, since these are degenerative diseases, most of these deaths occurred at relatively advanced ages. It is obvious that it is these diseases, resistant to any preventive measure, which are now the main cause of death among the population as a whole.

The figures for deaths from bronchitis were higher than in any other recent year. As 13 of the 17 deaths from the disease occurred in persons over 65 years of age, it is clear that, in most cases, death occurred in the chronic bronchitis, who had suffered from the disease for many years. It is also clear, from the period during which most of the deaths occurred, that the abnormally heavy death-roll from the disease during the year was mainly due to the markedly unfavourable weather conditions prevailing in the earlier part of the year.

The complete absence of deaths relating to pregnancy, childbirth or abortion in any of the years included in the table is both satisfactory and noteworthy, showing, as it does, the greatly increased safety of pregnancy and childbirth during recent years.

It will be noted that deaths from motor vehicle accidents were rather more numerous than in any other recent year. Of these deaths, three occurred in middleaged persons and one in an elderly person. This finding is somewhat in contrast to figures in other areas, where deaths involving young people are relatively more frequent.

As regards deaths from accidents not involving motor vehicles, one occurred in a young man who died from carbon monoxide poisoning inhaled while sleeping in a caravan, illustrating the importance of adequate ventilation when a solid fuel stove is being used in a relatively small space.

The one suicidal death involved a middle-aged woman, who died from coal gas poisoning, the verdict indicating that suicide resulted from the balance of mind being disturbed by physical suffering.

NOTIFIABLE INFECTIOUS DISEASES (OTHER THAN TUBERCULOSIS)

The following table shows the number of cases of the various infectious diseases, other than tuberculosis, notified during the year, and also, for comparison, the number of cases of these diseases notified during the preceding ten years:-

DISEASE	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Measles	248	--	127	2	215	52	209	194	320	3	425
Whooping Cough	86	--	2	7	11	15	1	34	--	--	19
Scarlet Fever	1	--	2	4	2	3	7	2	1	2	8
Erysipelas	1	--	--	--	1	--	1	--	--	--	--
Paralytic Poliomyelitis	--	--	1	--	2	--	--	--	--	--	--
Encephalitis	--	--	--	1	--	--	--	--	--	--	--
Dysentery	1	--	7	20	--	--	1	--	1	22	--
Food Poisoning	1	--	--	3	4	2	--	2	1	1	13
Pneumonia	15	1	4	1	6	--	2	1	12	1	3
Puerperal Pyrexia	8	8	4	6	17	7	4	8	8	6	10
Ophthalmia Neonatorum	--	--	--	--	1	1	1	6	1	2	2

The number of cases of measles was, of course, exceptionally large, due to it being a year following one when the incidence was very low. It would appear that, as is usual in such circumstances, the outbreak involved the vast majority of those younger children who had not had the disease during 1961, the last year of heavy incidence. As recorded in an earlier report, an effective prophylactic vaccine is much needed. Unfortunately, none is yet available that is suitable for general use.

Although the number of cases of whooping cough notified was higher than in either of the previous two years, it was not high in relation to the number of young children now living in the City. As may be seen from an earlier part of this report, it is now a number of years since any person in the City died from this disease. It is fair to assume that the present good record in relation to the disease is due to the inoculation programme carried out during recent years.

The number of cases of scarlet fever was slightly larger than in other recent years, but still satisfactorily small in proportion to the population at risk. It would seem that present methods of control of the disease, by isolation, usually in the home, and drug treatment are quite adequate to control the spread of this infection.

The continued absence of poliomyelitis from the district is a very welcome reward for all concerned with the vaccination campaign initiated some years ago. Both nationally and locally it would appear that the disease is now well under control, although continued efforts will obviously be required to maintain the present satisfactory position.

The absence of cases of dysentery is also satisfactory, particularly in view of the location of a fairly large residential nursery in the City, and speaks well for the precautions taken to prevent the introduction of this relatively common infection.

The number of cases of food-poisoning was larger than in other recent years, but all the cases resulted from one outbreak of very mild infection occurring in a local institution. The actual cause was not proved, such proof being made more difficult by the fortunate fact that the infection cleared up very quickly.

Although the number of cases of puerperal pyrexia was also rather greater than in other recent years, none revealed any infection giving rise to undue concern.

As regards those infectious diseases not included in the table, because no case has occurred within the period covered by it, the continued absence of smallpox, diphtheria and typhoid fever is satisfactory. Of these diseases, the absence of diphtheria can reasonably be attributed to the immunisation campaign still conducted against it, while the absence of smallpox and typhoid fever can be attributed to the efficient way in which outbreaks occurring, occasionally, in other parts of the country have been first localised and then eliminated.

TUBERCULOSIS

The two cases of pulmonary tuberculosis involved a young mother and her son of 2 years. Unfortunately, the disease in the mother had reached an advanced stage before treatment was sought, and death followed before effective treatment could be instituted.

The one case of non-pulmonary infection occurred in a man of 63 years.

The following table shows how the figures for 1963 compare with those for earlier years:-

Year	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
1947	4	2	1	1	2	1	1	--
1948	6	7	2	--	2	3	--	--
1949	3	3	3	3	3	--	--	--
1950	3	3	3	3	3	--	--	--
1951	1	3	3	1	--	1	1	--
1952	5	1	--	4	2	1	--	--
1953	2	1	1	1	--	1	--	--
1954	4	2	1	--	--	--	--	1
1955	3	4	1	--	--	--	1	--
1956	4	--	--	--	1	--	--	--
1957	1	--	--	--	--	--	--	--
1958	1		1	--	--	--	--	--

Year	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
1959	2	--	--	--	1	--	--	--
1960	1	1	1	1	2	--	--	--
1961	--	2	--	--	1	--	--	--
1962	1	--	--	1	1	--	--	--
1963	1	1	1	--	--	1	--	--

It will be observed that the figures are similar to those of other recent years, maintaining the improvement effected in 1957, but showing no sign, as yet, of the disease being completely eradicated from this community.

Arrangements for diagnosis, treatment and surveillance continued along the lines mentioned in earlier reports.

HOSPITAL ACCOMMODATION

I mentioned, in my last report, that some additional beds had been made available for the elderly chronic sick, and that the waiting-list of these patients for beds had, as a result, been somewhat reduced. Unfortunately, the waiting-list has again lengthened, and patients are again having to wait much longer for beds than they should. As priority for admission to hospital tends to depend more on home circumstances than on actual medical condition, these are checked where necessary. District nursing and home-help services are, of course, arranged where helpful during the period of waiting for a bed in hospital.

The demand for maternity beds at Victoria Hospital continued to increase with the influx of additional population in the younger age-groups to the area in and around Lichfield. Although this tended to reduce slightly the period of stay of the average mother in hospital, beds were available for all mothers with good indications for admission on obstetric, medical or social grounds.

As regards the availability of beds for patients suffering from infectious diseases, including tuberculosis, no difficulty was experienced during the year, as the much reduced demand for such beds obviated any real shortage, although patients do, of course, have to travel a relatively long distance for admission.

The question of the adequacy of the provision of beds for children in Victoria Hospital was raised during the year, and pressed, through the Hospital Management Committee, with the Regional Hospital Board. It would, however, seem that, although additional beds will be provided at Good Hope Hospital, Sutton Coldfield, there is relatively little hope of additional beds being provided in Lichfield.

NATIONAL ASSISTANCE ACTS, 1948 and 1951

No statutory action under either of these Acts was taken during 1963.

VENEREAL DISEASE

Arrangements continued as previously, patients being diagnosed and treated at hospitals at Birmingham, Burton-upon-Trent, Stafford and Walsall, from which any necessary followup of patients is also arranged. No figures are available in relation to patients treated.

LABORATORY FACILITIES

Arrangements in this field also continued as in earlier years, advice and assistance being available as required from the County Chemical and Public Health Laboratories in Stafford.

WATER SUPPLY

The supply, is, of course, provided by the South Staffordshire Waterworks Company, whose Engineer-in-Chief, Mr. R. H. Taylor, reports that it proved to be, during 1963, satisfactory both in quality and quantity. He records that it was tested frequently at all stations, the resulting samples being subjected to both chemical and bacteriological examination. The great majority of samples were satisfactory. Chlorination was carried out, as a precautionary measure, at most of the pumping stations, and, as an emergency measure, in all cases where burst or damaged pipes led to danger of contamination.

Mr. Taylor indicates that the water is not of a kind which absorbs lead in any undue degree, and that all samples taken were free from appreciable quantities of that mineral.

As regards fluoride content, the average varied from .09 parts per million at Trent Valley to .87 parts per million at Seedy Mill. The lower figure is, of course, quite unsatisfactory, while the higher figure, though reasonably satisfactory, is below the optimum figure of 1 part per million. Fortunately, it would appear that there is good reason to hope that arrangements will be made, within the next year or so, for the fluoride content to be brought up to a more satisfactory figure.

PUBLIC SWIMMING BATH

The water in the bath was sampled periodically, during use, and examined both chemically and bacteriologically. It was also tested for free residual chlorine, indicative of adequate chlorination. The samples were generally satisfactory. The City Surveyor was, of course, informed of all results, in order that any necessary investigation and adjustment could be carried out.

FOOD AND DRUGS ACT, 1955

Arrangements for the inspection of premises where food is prepared or sold to the public continued unchanged, and showed generally satisfactory conditions. Complaints regarding individual items of food purchased continued, however, to come in for investigation and appropriate action in larger numbers than in earlier years, no doubt due to the increased consciousness of the public in relation to the importance of food hygiene.

According to records provided by the County Medical Officer, 22 samples of milk and 77 other samples of food and drink were taken in the City by the Sampling Officers of the County Council during the year. All the samples of milk and 69 of the other samples were completely satisfactory. Of the 8 other samples, two of cherry brandy proved to be deficient in the declared proportion of proof spirit, and were withdrawn from sale, two of orange squash contained excess preservative, for which the manufacturer's explanation was accepted, while samples of steamed pudding, table salt, steaklets and buttered tea cakes proved to be either misleadingly labelled or unsatisfactory in other ways, appropriate informal action being taken in each case.

The following table shows the results of laboratory investigations of additional samples of milk, over and above those mentioned in my previous paragraph, tested during the year for cleanliness and, in appropriate cases, for the efficiency of the pasteurisation and sterilisation processes:-

Type of Milk	TEST					
	Methylene Blue (Cleanliness)		Phosphatase (Efficient Pasteurisation)		Turbidity (Efficient Sterilisation)	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
Tuberculin Tested (Pasteurised)	61	2	61	2	--	--
Pasteurised	26	2	28	--	--	--
Sterilised	--	--	--	--	34	--

The results are rather less favourable than in the previous four years, when all tests gave satisfactory results. The responsibility of dealing with unsatisfactory methylene blue results rests with the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, and for unsatisfactory phosphatase results with the County Medical Officer.

HOUSING

Of the 242 families rehoused by the Council during the year, I am informed by the Housing Manager that 30 families were rehoused from unfit houses, including prefabricated bungalows, and from houses on sites required for redevelopment, 64 families on general needs and 148 families from houses in Birmingham, under overspill arrangements.

The number of families on the waiting-list for houses declined from 585 families at the beginning of the year to 370 families at the end of the year, but the reduction was largely due to a revision of the list carried out during the year, when the names of those no longer in need of rehousing, for any reason, were removed from the waiting-list.

Apart from the purchase of a small number of individual houses, during the year, for demolition after the tenants had been rehoused, the main action in relation to the clearance of houses unfit for human habitation was the designation of a Clearance Area and the making of a Compulsory Purchase Order in respect of the houses 118 - 142, Lower Sandford Street, Lichfield. This action was later confirmed by the Minister of Housing and Local Government. When clearance of the existing houses is completed, and the area is redeveloped as a whole, a further important step in the Council's clearance programme will have been achieved.

Taking the clearance programme as a whole, further administrative and legal action is being held back at the moment until the clearance of houses which have already been the subject of such action is rather further advanced.

FACTORIES ACTS, 1937 - 1959.

Particulars relating to inspections under the Factory Acts are set out in the following table:-

No. of Factories on Register	Inspections	No. of Written Notices	Occupiers Prosecuted
73	64	2	Nil

The following table sets out the defects found, and action taken to remedy them:-

Particulars of Defect	Defects Found	Defects Remedied	Defects Referred		Prosecutions Instituted
			To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness	Nil	Nil	Nil	Nil	Nil
Overcrowding	Nil	Nil	Nil	Nil	Nil
Unreasonable Temperature	Nil	Nil	Nil	Nil	Nil
Inadequate ventilation	Nil	Nil	Nil	Nil	Nil
Ineffective drainage of floors	Nil	Nil	Nil	Nil	Nil
Sanitary Conveniences	Nil	Nil	Nil	Nil	Nil
(a) Insufficient	Nil	Nil	Nil	Nil	Nil
(b) Unsuitable or defective	2	2	Nil	1	Nil

Information relating to outworkers is set out below in the prescribed form:-

Nature of Work	No. of Outworkers on List	No. of Defaults in Sending List to Council	No. of Prosecutions in Failure to Supply Lists	No. of Instances of work in Unwholesome Places	Notices Served
Wearing Apparel					
Making Cleaning Washing	3	Nil	Nil	Nil	Nil

During the year three new premises were entered in the Council's Register, while fifteen were deleted, chiefly because of change of use. One of the complaints dealt with was in connection with a new factory, the other being at a garage and repair depot. The building sites in the City are inspected at regular intervals. Sanitary conveniences and washing facilities are now being provided before building operations are in progress. All the three outworkers in the City are concerned with the making or alteration of garments.

REPORT OF THE CITY SURVEYOR

Sewage Disposal Works and Sewers

The Sewage Disposal Works is working to full capacity, and its design figure has now been reached. The questions of extension and alterations to bring the Works up to the standard which will cater for the increased population is being investigated in conjunction with a possible large scale modernisation and improvement of the entire sewerage system. A Foreman was appointed during the year to assist the Sewage Works Manager. Work in connection with the preparation of sewer records has gone ahead and these records are now substantially complete.

Public Swimming Baths

The number of patrons at the Baths has continued to increase. New steps were fitted at the deep end and the false ceiling repaired. In addition new signs have been erected. It is proposed to redecorate the Baths in 1964. A new heater has been fitted in the filtration house. Consultations have been held with affected persons relating to the fuel for heating the water at the Baths, and the National Institute for Fuel Economy are to give a report upon the heating system.

House Refuse Collection

Personnel Administration Ltd., have been called in to report upon the method of refuse collection and disposal, and are carrying out a "works study" of the organisation. Their first report is expected in the near future. The tip at Shenstone is rapidly coming to the end of its life, and negotiations for further tipping space in the Northern area are proceeding. Planning permission has been received in respect of two fields in The Dimbles area. A new tracked vehicle for levelling is proposed to be purchased for use on this tip. Further investigations, both with the Rural District Council and separately, have taken place regarding pulverisation and other methods of refuse disposal, for future consideration by the City Council.

Public Conveniences

Further lighting and improvements have been carried out in some of the conveniences, and the remainder of the turnstiles were removed from the ladies' conveniences during the year. A new public convenience in the Bus Station terminal block is proposed, and it is also intended to erect a new convenience block in Beacon Park for use by the children and other persons on this play area.

REPORT OF THE PUBLIC HEALTH INSPECTOR

GENERAL INSPECTION OF DISTRICT

Investigation of Complaints

All complaints are investigated as soon as practicable after being received. During the year under review, 310 complaints relating to the various branches of environmental hygiene were dealt with. The time occupied by this work restricts the amount of routine inspectorial work which can be done.

HOUSING ADMINISTRATION

The demand for accommodation to rehouse tenants from properties in the central development area was responsible for retarding progress in housing work. There were no further developments in connection with the Stowe Street area. Some progress was made in Sandford Street where work in relation to a clearance area was completed. There was no appeal against the application of the City Council for a Compulsory Purchase Order in respect of the Sandford Street property but the houses were inspected by an inspector from the Ministry of Housing and Local Government towards the end of the year.

Modernisation of old properties seems mainly to be undertaken when the houses concerned are occupied by the owners. The majority of old houses which become vacant are offered for sale and most of them are modernised by the new owner/occupiers. Developments on these lines have made a significant contribution to the general raising of housing standards in the City. This tendency is not peculiar to Lichfield, as many other districts have experienced the same change in housing conditions.

Premises Registered for the
Manufacture of Cooked Meats, etc.

There are 10 shops in the City which are registered under the Food and Drugs Act for the preparation of these products. All these premises are inspected at frequent intervals.

Principal Food Premises

Apart from canteens at factories and schools, the undermentioned is a classification of the main food premises in the City.

Meat Shops.....	14
Fried Fish Shops.....	2
Fresh Fish Shops.....	3
Grocers.....	14
Confectioners.....	8
Fruit & Vegetable Shops	12
Hotels.....	7
Restaurants.....	12
Public Houses.....	33

Unsound Food

The following articles were destroyed after being found unfit for human consumption and voluntarily surrendered:

Beef	16 lbs.	Jellies	6
Beans	1 tin	Leg Pork	11 $\frac{3}{4}$ lbs.
Chopped Pork & Ham	1 tin	New Zealand Liver	4 tins
Casserole Meat	2 tins	Lambs Liver	2 tins
Carnation Mild	1 tin	Lemon Juice	2 casks
Corned Beef	4 tins	Ox Tongue	1 tin
Carrots	1 tin	Oranges	1 tin
Peaches	6 tins	Peas Processed	1 tin
Pineapple	2 tins	Salmon	1 tin
Tomatoe Juice	2 tins	Tomatoes	21 tins

RODENT CONTROL

This work is done under my supervision. The part-time rodent operator has been employed chiefly in dealing with complaints and making the re-visits and checks to ensure that treatment has been effective. Block surveys are undertaken when time can be spared for this kind of work. These surveys enable minor infestations to be dealt with as they arise. The building sites continue to cause some concern and call for regular visits by the operative. A major infestation at the Shenstone refuse tip was brought under control with the help of my colleague in the Lichfield Rural District. It is certain that many rats were destroyed during the period of intensive treatment. During the year, treatments were carried out at 47 trade premises and 52 private dwelling houses. Five treatments were necessary at the Minster Pool where minor infestations occur at frequent intervals due mainly to food left on the banks by people feeding the water birds. Regular visits are made to the Council's Sewage Disposal Works at Curborough.

